

# Sample Member cards



**WVCHIP BLUE**

Medical & Prescription Drug Card


**1234567890**

EMPLOYEE IDENTIFICATION

**Janie S. Doe**

EMPLOYEE NAME

Wells Fargo Medical Group #7771

 EXPRESS SCRIPTS\*

RxBin 003858  
RxPCN A4  
RxGrp WVCA

THIS CARD DOES NOT PROVE MEMBERSHIP NOR GUARANTEE COVERAGE.

**MEDICAL BENEFITS:**  
For medical claims, benefit information, eligibility or precertification, call toll free 800.356.2392. Please submit claims to: Wells Fargo TPA, P.O. Box 2451, Charleston, WV 25329-2451. EDI # 87815 Website: <http://TPA.WellsFargo.com>

**MEDICAL CO-PAYS:**  
Non-Well Visits: \$15; Inpatient Services: \$25 per admit; Outpatient Services: \$25 per service; Emergency Room: \$35 per visit (waived if admitted); Dental Services: \$0; Preventive Services: \$0

**PRESCRIPTION BENEFITS:**  
Express-Scripts: For drug claims information or to locate a participating pharmacy in your area, visit [www.express-scripts.com](http://www.express-scripts.com) or call member services at 877.256.4680. Please have this card available when you call. Submit all prescription drug claims to: Express-Scripts, P.O. Box 66583, St. Louis, MO 63166

**PHARMACISTS:**  
Please obtain positive identification of the member presenting this card. For Pharmacist Help Desk 800.824.0898

**DRUG COPAYS:** \$0 for generic \$10 for brand  
Contact the WVCHIP HelpLine at 877.982.2447 to report suspected fraud.

"Aetna Participating doctors and hospitals are independent providers and are neither agents nor employees of Aetna."

  
000000000004

BLU771A.DBF



**WVCHIP GOLD**

Medical & Prescription Drug Card

**0123456789**

EMPLOYEE IDENTIFICATION

**John M. Doe**

EMPLOYEE NAME

Wells Fargo Medical Group #7771

 EXPRESS SCRIPTS\*

RxBin 003858  
RxPCN A4  
RxGrp WVCA

THIS CARD DOES NOT PROVE MEMBERSHIP NOR GUARANTEE COVERAGE.

**MEDICAL BENEFITS:**  
For medical claims, benefit information, eligibility or precertification, call toll free 800.356.2392. Please submit claims to: Wells Fargo TPA, P.O. Box 2451, Charleston, WV 25329-2451. EDI # 87815 Website: <http://TPA.WellsFargo.com>

**MEDICAL CO-PAY:**  
Non-Well Visits: \$5; Inpatient Services: \$0 per admit; Outpatient Services: \$0 per service; Emergency Room: \$0 per visit; Dental Services: \$0; Preventive Services: \$0

**PRESCRIPTION BENEFITS:**  
Express-Scripts: For drug claims information or to locate a participating pharmacy in your area, visit [www.express-scripts.com](http://www.express-scripts.com) or call member services at 877.256.4680. Please have this card available when you call. Submit all prescription drug claims to: Express-Scripts, P.O. Box 66583, St. Louis, MO 63166

**PHARMACISTS:**  
Please obtain positive identification of the member presenting this card. For Pharmacist Help Desk 800.824.0898

**DRUG COPAYS:** \$0 for generic \$5 for brand  
Contact the WVCHIP HelpLine at 877.982.2447 to report suspected fraud.

"Aetna Participating doctors and hospitals are independent providers and are neither agents nor employees of Aetna."

  
000000000002

BLU771B.DBF



**WVCHIP PREMIUM PLAN**

Medical & Prescription Drug Card


**9876543210**

EMPLOYEE IDENTIFICATION

**Jane W. Doe**

EMPLOYEE NAME

Wells Fargo Medical Group #7771

 EXPRESS SCRIPTS\*

RxBin 003858  
RxPCN A4  
RxGrp WVCA

THIS CARD DOES NOT PROVE MEMBERSHIP NOR GUARANTEE COVERAGE.

**MEDICAL BENEFITS:**  
For medical claims, benefit information, eligibility or precertification, call toll free 800.356.2392. Please submit claims to: Wells Fargo TPA, P.O. Box 2451, Charleston, WV 25329-2451. EDI # 87815 Website: <http://TPA.WellsFargo.com>


**MEDICAL CO-PAYS:**  
Non-Well Visits: \$20; Inpatient Services: \$25 per admit; Outpatient Services: \$25 per service; Emergency Room: \$35 per visit (waived if admitted); Dental Services: \$25 most non-preventive services; Preventive Services: \$0

**PRESCRIPTION BENEFITS:**  
Express-Scripts: For drug claims information or to locate a participating pharmacy in your area, visit [www.express-scripts.com](http://www.express-scripts.com) or call member services at 877.256.4680. Please have this card available when you call. Submit all prescription drug claims to: Express-Scripts, P.O. Box 66583, St. Louis, MO 63166

**PHARMACISTS:**  
Please obtain positive identification of the member presenting this card. For Pharmacist Help Desk 800.824.0898

**DRUG COPAYS:** \$0 for generic \$15 for brand  
Contact the WVCHIP HelpLine at 877.982.2447 to report suspected fraud.

"Aetna Participating doctors and hospitals are independent providers and are neither agents nor employees of Aetna."

  
000000000001

BLU771C.DBF